

Health and Family Planning Overview

BENIN



Population:	6.8 million (BUCEN 2002)
Infant Mortality Rate:	89 (2001 Preliminary DHS)
DPT3 Coverage:	72.5%, children 12–23 mos. (Preliminary DHS 2001)
Nutrition:	25% stunting, children 0–35 mos. (DHS 1996)
Total Fertility Rate:	5.6 (2001 Preliminary DHS)
Maternal Mortality Ratio:	498 (DHS 1996)
Contraceptive Prevalence Rate:	7.2%, married women, modern methods (Preliminary DHS 2001)
Adult HIV Prevalence:	3.6% (UNAIDS 2001)
Current Living AIDS Orphans:	34,000 (UNAIDS 2001)
Demographic and Health Survey:	1996, 2001 Preliminary
Multi-Indicator Cluster Survey:	None

Country Profile

Benin continues its transition to a democratic, free-market society through political, economic, and social reform. However, several challenges impede the country's growth and development, including weak and inefficient public administration and delays in decentralizing. The education sector has already begun to decentralize, and the health sector also has the potential to improve services. Health districts have been created and local health committees have been established to identify health priorities and develop strategies. At present, however, inadequate utilization of health care services continues to have negative effects on the health and productivity of the population.

HIV/AIDS in Benin. In 1999, there were an estimated 159,216 adults and children with HIV/AIDS living in Benin. The government was initially slow to recognize the disease's social impact and implement a multisectoral response, but awareness, health promotion, and disease prevention efforts are now in place and continuing throughout the country. As in other countries of the region, the HIV/AIDS epidemic is concentrated in the young adult population and will continue to pressure the economic and health sectors. Projections of HIV prevalence in the next 25 years range from 10 to 20 percent of the adult population. Infant mortality is expected to increase because of the epidemic.

USAID Strategy

USAID/Benin is working under a strategic plan that was recently extended by two years; the plan now covers programs from 1998 to 2005. Primary programs include a social marketing activity to prevent HIV/AIDS transmission and an integrated family health initiative with the government. The Mission works closely with the Ministry of Health, multilateral and other bilateral institutions, and local and international nongovernmental organizations (NGOs). Along with its related strategic objectives in education and special objective in democracy and governance, USAID/Benin pursues one strategic objective in family health with four intermediate results.

Strategic Objective: Increased use of family health services and preventive measures within a supportive policy environment

Intermediate Results:

- Improved policy environment
- Increased access to family health services and products
- Improved quality of management and services
- Increased demand for and practices supporting use of services, products, and prevention measures



Major Program Areas

HIV/AIDS. HIV/AIDS prevention and control is a top priority for USAID/Benin. USAID assistance supports advocacy and prevention activities. To raise awareness of the damaging effects of HIV/AIDS on development, the Mission supports advocacy efforts targeted toward high-level government officials, decision makers, opinion makers, and journalists. USAID's participation in a multidonor advocacy campaign targeting high-profile political and government leaders paved the way for a significant budget increase for the national HIV/AIDS prevention program. With Mission assistance, information, education, and communication materials have been developed and distributed to promote prevention of HIV and other sexually transmitted infections (STIs) among the general public. Mission funding and support also promote condom use and are helping to improve condom supply and distribution through integrated reproductive health services at health centers, social marketing programs, and community-based distribution activities. Surveys of health behaviors and knowledge of HIV/AIDS and other STIs are implemented in order to better monitor the course of the HIV/AIDS epidemic. A new activity scheduled to begin in 2002 will support improvement of the national surveillance system and national education activities while targeting vulnerable groups in selected geographic areas.

Health and Family Planning. Mission activities promote smaller, healthier families and support efforts to achieve sustainable development through increased access to family planning commodities and related reproductive health services. Activities include efforts to improve the distribution of family planning products through a national contraceptive distribution system, expanded community-based distribution, and contraceptive social marketing. The Mission is supporting a program to improve health services by integrating reproductive health into the medical school curriculum and by training public and private health professionals in family planning and managing STIs. In 2001, a competency-based reproductive health program was introduced at the national medical school. In the Borgou region, the Mission supports efforts to improve service delivery by public and private sector providers, to improve health data collection, to decentralize health care management, and to strengthen the capacities of the Ministry of Health and NGOs. In the Oueme region, the Mission supports a child survival program that focuses on prevention and case management of malaria and related childhood illnesses. USAID/Benin also contributes to improved child health by supporting micronutrient supplementation, diarrheal disease prevention, and social marketing of oral rehydration salts and insecticide-treated bed nets.

Results

- The national HIV/AIDS budget increased from \$325,000 in 2000 to about \$2.9 million in 2001.
- An injectable contraceptive (Depo-Provera) was introduced in 2000.
- Exclusive breastfeeding (for infants under 4 months) increased from 19 percent in 1996 to 52.2 percent in 2000 in USAID's target region in northern Benin.
- USAID collaborated with the Ministry of Health to establish and adopt a national emergency obstetric and neonatal care program.
- Condom social marketing sales increased from approximately 5.8 million in 2000 to 6.5 million in 2001.
- National sales of oral contraceptives increased from 69,960 cycles in 2000 to 88,800 in 2001.
- In 2001, 132 health workers and 22 laboratory technicians received training in the Integrated Management of Childhood Illness strategy.
- 350 community-based agents serving more than 300,000 people received materials for providing and promoting family health services.
- A social marketing initiative sold more than 33,000 insecticide-treated bed nets for malaria prevention.

Major Implementing Partners

USAID/Benin's partners in implementing population, health, and nutrition activities include University Research Co. (the prime contractor for the Benin Integrated Family Health Program, or PROSAF), Population Services International, CARE, INTRAH, Catholic Relief Services, Africare, BASICS, JHPIEGO, and Macro International.



This USAID Health and Family Planning Overview was prepared for the Bureau for Africa, Office of Sustainable Development, by the Population, Health and Nutrition Information Project (PHNIP). Questions and comments can be directed to PHNIP (info@phnip.com).

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